

Certificate of Doing Business Under an Assumed Name (D/B/A)

I HEREBY CERTIFY that I am conducting or transacting business in Broome County pursuant to Section 130 of the New York State General Business Law, under the name or designation and at the address of:

Business Nam	e:			
Address:				
My full name	and place of residend	ce is:		
Name:				
City:		State:	Zip:	
I FURTHER	USED this name of nam	years of age (if under 18).	e of former owner of business, if applicable) S. <u>HE PRESENCE OF A NOTARY</u>	
My Signature:			Date:	
STATE OF NEW COUNTY OF BR	: ss.:			
satisfactory evide	nce to be the individual wh	, personally nose name is subscribed to the within in	before me, the undersigned personally appeared known to me or proved to me on the basis of strument and acknowledged to me that he/she t, the individual, or the person upon behalf of	
	ual acted, executed the inst		, the marviaual, of the person upon benall of	

Signature and Office of Individual taking acknowledgement - Notary Public